# Medicaid State Plan Administration

**General Administration** 

#### Reporting

#### **Package Header**

Package IDAR2024MS00020SPA IDAR-24-0013Submission TypeOfficialInitial Submission DateN/AApproval DateN/AEffective Date10/1/2024Superseded SPA IDNewUser-EnteredUser-Entered

### **A. General Reporting**

The agency submits all reports in the form and with the content required by the Secretary and complies with any provisions that the Secretary finds necessary to verify and assure the correctness of all reports.

 $\Box_{\mathbf{X}}$ 1. The agency assures that all requirements of 42 CFR 431.16 are met.

#### **B. Annual Reporting on the Child and Adult Core Sets**

\_\_\_\_1. The agency assures that all requirements of 42 CFR 437.10 through 437.15 are met.

 $\Box_{\mathbf{x}}^2$ . The agency reports annually, by December 31, on:

a. All measures on the Child Core Set that are identified by the Secretary pursuant to 42 CFR 437.10.

b. All behavioral health measures on the Adult Core Set that are identified by the Secretary pursuant to 42 CFR 437.10.

## **C. Additional Information (optional)**

# PROPOSED

